

Statement of:

Diana Romero, PhD, MA
Associate Professor of Urban Public Health
City University of New York (CUNY) School of Public Health
2180 Third Avenue, Rm 542, New York, NY 10035
ph: 212-396-7743
email: diana.romero@hunter.cuny.edu

Elizabeth Fuentes, MPH
CUNY Graduate Center
365 5th Ave, New York, NY 10016
efuentes@gc.cuny.edu

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Temporary Assistance for Needy Families (TANF) is a critical program for low-income families; however, the current family-cap policy denies additional income support to poor women who have a baby while enrolled in TANF. The family-cap policy does not directly address the goals of welfare reform, ie, helping low-income families end their dependence on governmental support by obtaining stable jobs at a living wage.

States had the option of implementing the family-cap policy and 24 states did so (see Table 1). The law does not require that states evaluate their programs to determine if the policy has achieved its intended result: to deter poor women from giving birth.

A policy such as the family cap can make a powerful statement about the beliefs and values of American society. Therefore, it is critical to understand the impact of such a policy, which assumes that poor women make reproductive decisions based on whether they can expect to receive an increase in their cash assistance with the birth of a new child. As the time approaches for Congress to consider reauthorizing our national welfare program, it is important that legislators examine the past almost 2 decades of family-cap policy experience and ask whether this policy has achieved its objectives and helped poor women succeed economically.

The family cap is not effective

There have been approximately 10 evaluations of the family cap in various states that have implemented it. In a study of 32 current and former welfare recipients in New Jersey, none of the women knew what the family cap was. After being informed of the policy, more than half of the women said it would *not* influence their decision to have a child while receiving TANF. Three-quarters of the women said that the family-cap policy would not influence them in the future on whether or not they would decide to have a child while receiving TANF.

Analysis of data from the National Survey of Family Growth found that poor and non-poor women had no differences in reproductive health behaviors both before and after the family-cap policy was implemented, including contraception use, pregnancy, sterilization and births. The only exception was abortion, where poor women were more than twice as likely to have had an abortion than non-poor women before welfare reform. After welfare reform that disparity grew, with poor women more than 3 times as likely to have an abortion as non-poor women 7 years after welfare reform.

A study of the 24 states with the family cap found that most state welfare agencies do not provide welfare recipients with written information specifically about the policy.

Of eight other studies of the family-cap policy that used diverse sources of quantitative data, 7 failed to find any association with the family-cap policy and women's fertility. However, two studies found that an increased abortion rate was associated with the family-cap policy.

State policies are inconsistent with the goals of the family cap

In the study involving the 24 family-cap states, administrators reported that very few formal state-level evaluations of the policy had been conducted; most administrators did not believe that

the policy was effective. Moreover, the researchers concluded that related state policies were inconsistent with the goals of the family cap. In sum,

- Of 24 states that implemented the family cap, only 6 of them conducted an evaluation of the policy.
- Three states have repealed the family-cap policy, one of which found through evaluation that it was not shown to be effective in reducing poverty.
- Some states have other policies that are inconsistent with the family-cap policy; for example, 10 states lack a Medicaid family planning waiver.
- Some states continue to collect child support payments from the fathers of children who have been subject to the family cap. Instead of passing the funds through to the families, some states keep most or all of the child support payment even though no additional TANF monies are provided for the capped child.
- Some states carry over the family cap to a birth to a teen daughter who was part of a household enrolled in the TANF program.
- Of 24 state welfare administrators, 15 felt the policy was ineffective and 5 were unsure of its effectiveness. The 4 who felt the family cap was effective did so in the absence of any empirical evidence.

Overall, the empirical evidence related to the impact of the family-cap policy is mixed but mostly indicative of a lack of an effect on poor women's fertility. Most studies, whether directly measuring the family cap or using proxies for childbearing among welfare recipients, did not find an effect. In addition, an experimental design, considered the most rigorous form of evaluation, reported an *increase* in abortions among welfare recipients subject to the family cap, particularly among recent enrollees.

TANF reauthorization should eliminate ineffective policies

Congress must carefully take into account the evidence-based and ethical justifications for reauthorizing a policy that appears to have little effect on women's fertility but instead may put them in the position of continuing to raise their children in poverty. Until now, policymakers have not considered the family-cap policy's disproportionate impact on low-income women and women of color. Nor have they considered the family-cap policy's impact from within a human rights framework. In fact, the United States is a signatory to several international covenants that have articles pertinent to the family-cap policy, including the Universal Declaration of Human Rights, in which the US figured prominently in its development. This document stipulates that all are born free and equal in dignity and rights (Art 1.), deserve protection from interference with privacy, family and home (Art. 12), and have the right to marry and found a family, entered into with free and full consent (Art. 16); that motherhood and childhood are entitled to special care

and assistance (Art. 25), and that all children, whether born in or out of wedlock, shall enjoy the same social protection.

The TANF program is a key support for helping poor Americans weather a depressed economy and high joblessness. Given the lack of impact of the family-cap policy on recipients' fertility or income, it is incumbent on Congress to eliminate the family-cap provision when it reauthorizes TANF.

For further information, contact Diana Romero, PhD, MA, Diana.Romero@hunter.cuny.edu, 212-396-7743.

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Table 1. U.S. States that Implemented the Family-Cap Policy

State	Year of Family Cap Implementation
Arizona	1995
Arkansas	1994
California	1997
Connecticut	1996
Delaware	1997
Florida	1996
Georgia	1994
Idaho	1997
Illinois	1995*
Indiana	1995
Maryland	1996 [†]
Massachusetts	1995
Minnesota	2003
Mississippi	1995
Nebraska	1996 [‡]
New Jersey	1992
North Carolina	1996
North Dakota	1999
Oklahoma****	1997
South Carolina	1996
Tennessee	1997
Virginia	1995
Wisconsin	1996
Wyoming	1997

[†] Family cap repealed by state legislature in 2004.

^{††} All counties used state “opt out” provision since 2002 in order to not implement the family cap; in 2008 the state legislature repealed the policy.

[‡] Family cap repealed in 2007.

**** Family cap repealed in 2009